OAHU CANDIDATES-SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT **CANDIDATE COMMITTEE**



PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.") SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: SECTION II-TYPE OF REPORT: (a) Candidate Name: (See the Schadule of Reporting Dates to complete this section) Amended First Third Second Fourth Committee Name: (c) Mailing Address: 3L Final Primary REPORTING PERIOD (d) Phone (Bus) Final Election Period 04 through 06/30 Treasurer's

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

Supplemental

		COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE			
1.	Cash on Hand at the Beginning of the Election Period.		149.00			
2.	Cash on Hand at the Beginning of this Reporting Period	149.08	2			
3.	Total Receipts (From Line 15)	0	O 3			
4.	Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)	149.09	149.00 4			
5.	Total Disbursements (not including Unpaid Expenditures) (From Line 19)	149.08	149.08			
6.	Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)	0	0 6			
7.	Total Loans at the Closing of this Reporting Period	14,000	7			
8.	Total Unpaid Expenditures at the Closing of this Reporting Period	D	8			
9.	Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)	14,000.	9			
	Surplus Deficit Subtract Line 9 from Line 6)	(14,000)	10			
hereby centry that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.						
	18.05 Wanah 1 129.05					
cand	idate Signature Date Treasurer Sign	ature	Date			

Short form is checked it the candidate is sining a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less Short form reporting requires completion of only Saction I, Section III of this Disclosure Report.

An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a four-year office.

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS (If Necessary, Complete Schedules A through E Before Completing This Section)

COLUMN A COLUMN B

RECEIPTS	TOTAL THIS PERIOD	TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less	0	0	11(a)(
(ii) Monetary and Non-Monetary Contributions of More Than \$100	0	0	11(a)(i
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii))	0	0	13(a){i
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less	O	0	11(6)(1)
(ii) Monetary and Non-Monetary Contributions of More Than \$100	0	0	11(6)(6
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii))	0	0	11(6)(#
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)	0	0	12
13. Public Funds and Other Receipts	0	0	13
14. Loans	0	0	14
15. Total Receipts (Add Lines 12 through 14)	0	0	15
DISBURSEMENTS			
16. Expenditures	149.08	149.08	16
7. Loans Repaid or Forgiven	D	0	17
8. Unpaid Expenditures Paid or Forgiven	0	0	18
9. Subtotal Disbursements (Add Lines 16 through 18)	149.08	149.08	19
20. Unpaid Expenditures	0		20
21. Total Disbursements (Add Lines 19 and 20)	149.00	149.08	21

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AN	ND CANDIDATE COMMITTEE NAME: JOHN D. WA KOKUA WAU	indee of soliciting contributions or for any committee to Wage 1	*
DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALU OF NON-MONETAR CONTRIBUTION THIS PERIOD
02/01/04	Hawaii Campaign Fund 235 S. Berctania, Em 300 Hon H1 96813	lak penalty	\$ 50.
	Central Pacific Bank 220 S. King St. Hon H1 98813	Bank Fees	99.06
	CONTINUE TON		
	NON-MONETARY CONTRIBUTION		
Tree to the state of the state	NON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		
		, in the state of	
	EXPENDITURES THIS PERIOD (This Page) TURES THIS PERIOD (Last Page Only) (Transfer total to Line Number	***************************************	149.00